

## **Application Data Sheet**

### **Application Information**

Application number:	
Filing Date:	March 30, 2004
Application Type:	Regular
Subject Matter:	Utility
Suggested classification:	
Suggested Group Art Unit:	
CD-ROM or CD-R?	None
Number of CD disks:	
Number of copies of CDs:	
Sequence submission?	
Computer Readable Form (CRF)?	
Number of copies of CRF:	
Title:	SWIM CAP WITH MULTIPLE DUROMETERS
Attorney Docket Number:	005127.00356
Request for Early Publication?	NO
Request for Non-Publication?	NO
Suggested Drawing Figure:	2
Total Drawing Sheets:	4
Small Entity?	NO
Latin name:	
Variety denomination name:	
Petition included?	NO
Petition Type:	
Licensed US Govt. Agency:	
Contract or Grant Numbers:	
Secrecy Order in Parent Appl.?	NO
Applicant Authority Type:	Inventor
Primary Citizenship Country:	United States

Status: Full Capacity  
Given Name: Dylan S.

Family Name: VAN ATTA  
Name Suffix:  
City of Residence: Portland  
State or Province of Residence: OREGON  
Country of Residence:  
Street of mailing address: 1040 NW 10<sup>th</sup> Avenue, #438  
City of mailing address: Portland  
State or Province of mailing address: OREGON  
Country of mailing address:  
Postal or Zip Code of mailing address: 97209  
Applicant Authority Type: Inventor  
Primary Citizenship Country: United States  
Status: Full Capacity  
Given Name: Robert

Family Name: BRUCE  
Name Suffix:  
City of Residence: Portland  
State or Province of Residence: OREGON  
Country of Residence:  
Street of mailing address: 4814 S.E. Harrison Street  
City of mailing address: Portland  
State or Province of mailing address: OREGON  
Country of mailing address:  
Postal or Zip Code of mailing address: 97215

### **Correspondence Information**

Correspondence Customer Number: 22910

## Representative Information

Representative Customer Number: 22910

## Domestic Priority Information

Application:	Continuity Type:	Parent Application:	Parent Filing Date:

## Foreign Priority Information

Country:	Application number:	Filing Date:	Priority Claimed:

## Assignee Information

Assignee name:

Street of mailing address:

City of mailing address:

State or Province of mailing address:

Country of mailing address:

Postal or Zip Code of mailing address: